

DOCUMENT NAME: Continuous Travel Orders**DAFIS DOCUMENT TYPE: 13**

1. **Description:** Travel orders issued on a continuing basis (monthly, quarterly, annually).
2. **Primary Forms:** DD-1351-2, Travel Voucher or Subvoucher
3. **Related Forms:** CG-4251, Military and Civilian (TAD/TD) Request and Travel Orders
CG-5131, Standard Travel Orders For Military Personnel (refer to Figure 12C-21)
SF-1038, Advance of Funds Application and Account
4. **Document Number:** Standard Number - unit assigned.

SAMPLE: 1394904FAB001

<u>Document Type</u>	<u>FY Funded</u>	<u>Procurement Site Code</u>	<u>FY Contract Originated</u>	<u>Region</u>	<u>Program Element</u>	<u>Document Sequence</u>	<u>Suffix</u>
13	94	90	4	F	AB	001	

5. **Accounting Line:** If multiple lines are used, a different suffix is required for each line starting with 000.

SAMPLE: 2/F/401/136/30/0/AB/12345/2100 (See Note)

Note: For reimbursable travel be sure to include the reimbursable number after the object class code. For further information see Chapter 9.

6. FINCEN Critical Processing Requirements:

- a. Issuing units must ensure travel orders CG-4251 or CG-5131 are completed in entirety. The following information is critical for processing:
 - (1) Name and SSN of traveler.
 - (2) Accounting data - CG-4251, block 14; CG-5131, block 9 or 12.
 - (3) Standard DAFIS document number - CG-4251, block 15 under Document ID, Travel Order Number (TONO) heading; CG-5131, block 1.
 - (4) Appropriate Treasury Symbol (Appendix B) - CG-4251, block 14 (above DAFIS accounting line) or in block 12 (preceded by APPN:); CG-5131, block 9 or 12 (preceding the DAFIS accounting line).
 - (5) Estimated cost - CG-4251, block 15; CG-5131, block 12.

6. a. (6) Civilian Mileage/Per diem- CG-4251, blocks 16 and 17 must be completed for civilian personnel.
b. Obligation documents submitted for obligation must be legible and clearly marked "OBLIGATION COPY".
7. **Other Information:** A different suffix must be assigned for each member traveling under group orders. Begin with suffix 001 and number each traveler consecutively.
8. **LUFS Information:**
 - a. Standard generic input is made through the Record Spending Module. Use the [F7] INDVDL TRAVEL option when adding the accounting lines. This option will only assign a new suffix if the accounting classification is changed. When prompted, create a document type 14 if this set of travel orders has a Government Transportation Request (GTR) or Schedule Airline Travel Office (SATO) ticket issued for transportation (see document type 14).
 - b. Obligation will transmit electronically via LUFS if desired.
 - c. A copy of this document is NOT to be mailed to FINCEN if the obligation is transmitted via LUFS.
9. **Document Flow:**

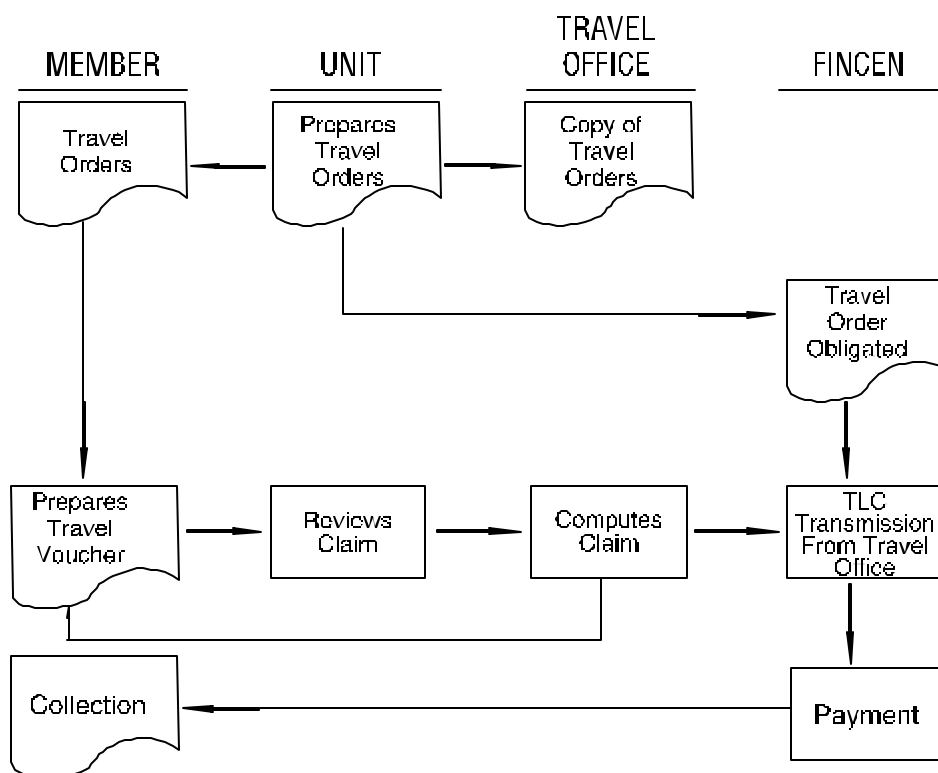


Figure 12C-9 Travel - TDY

9. a. Figure 12C-9 describes the procedures for processing Continuous Travel Orders.
- b. The unit prepares the travel orders for the member and forwards copy 5 with estimated cost to the servicing travel office. The unit retains copy 4 for the unit files and gives the remaining copies to the member. Non-LUFS units should send a copy marked OBLIGATION COPY to the FINCEN to be obligated.
- c. Travel will then be arranged either by the member with their personal American Express card, by the unit's corporate American Express card or through the local travel office. If a Government Transportation Request (GTR) is involved, see the document type 14 section of this chapter.
- d. When a cash advance is required the unit prepares a SF-1038 for the member. Advances may be paid via check, cash or traveler's checks. For payment via check, this form is forwarded to the travel ACO for approval. The travel ACO will forward requests for check payments to the FINCEN. (For more information on check payment transmittals, see Chapter 11). For cash or Traveler's Checks, this form is submitted to the authorized approving official for signature. (For more information on Traveler's Checks see Chapter 11). Cash advances are limited to \$500.00. The member gives the imprest fund cashier the SF-1038 along with the original and one copy of the travel orders.
- e. The imprest fund cashier endorses the original copy of the travel orders and gives the member the cash advance. The cashier also returns the original copy of the travel orders to the member. The imprest fund cashier forwards a copy of the SF-1038 weekly to the FINCEN for replenishment and forwards their respective travel office a copy of the member's TAD orders and advance card.
- f. Upon completion of travel, the traveler prepares a DD-1351-2 and submits it along with the original and three copies of the travel orders to the unit for review/approval. It is then forwarded to the servicing travel office.
- g. The travel office computes the claim and transmits it to the FINCEN via the Travel Liquidation Certification (TLC) program. Payment will then be made to the member, if required. See Chapter 11 for more information on TLC. Also see the Travel Advance Control (TAC) section of Chapter 11 if an advance has been made.
- h. If the travel is for another government agency on a reimbursable basis, a copy of the agreement must be FAXED to the FINCEN (OGR) at (804) 523-6024 at the time the order is created. See the Reimbursable Travel section of Chapter 9.
- i. TAD and Reserve Training spanning more than one FY should be prorated to each FY in which travel is performed rather than just the FY in which the travel was authorized. Tickets for round trip are charged against the appropriation current at the time the tickets are purchased. LUFS units will obligate and transfer current FY data normally. The next FY data should be entered into the local system but not transferred. Cost will be picked up as a direct charge from the PES reports. When the TAD or training crosses the FY, only one set of orders is required but orders must indicate two lines of accounting and two DAFIS document ID numbers, one for each FY.

10. Sample Forms: See Figures 12C-10, 12C-11 and 12C-12.

11. PES Report Sample:

DOCUMENT ID	TRANS CODE	BATCH NUMBER	COST CENTER	OBJ CLASS	COMMIT	UNDELIVERED ORDERS	ACCRUED EXPEND	EXPEND
1394904FAB001000	073	94025F130	12345	2100	0.00	0.00	150.00	0.00
1394904FAB001000	146F	94045F130	12345	2100	0.00	0.00	150.00-	150.00

12. References:

- a. COMDTINST M4600.12, Travel Manual.
- b. COMDTINST M4600.14, Travel Charge Card Program.
- c. COMDTINST M7210.1, Certifying and Disbursing Manual.
- d. COMDTINST M12570.4, Civilian Travel Management Program.
- e. DOT Order 1500.6, Travel Manual.
- f. Joint Federal Travel Regulations, Volume I.

TRAVEL VOUCHER OR SUBVOUCHER				(Complete by typewriter, ink, or ball point pen (PRESS HARD) do not use pencil)		10. FOR DO USE ONLY	
READ PRIVACY ACT STATEMENT ON REVERSE PRIOR TO COMPLETING THIS FORM.							
LAST NAME FIRST NAME MIDDLE INITIAL (Print/Type)		GRADE/RANK		SSN		DO VOUCHER NO.	
Smith, John		SK1		123-12-1234		SUBVOUCHER NO.	
CHECK MAILING ADDRESS (include ZIP Code)		23706		DUTY PHONE NO.		PAID BY	
1800 Portsmouth Blvd, Portsmouth, VA		(804) 396-5731					
ORGANIZATION AND STATION USCGC Neversail, 1234 Coast Guard Blvd, Portsmouth, VA 23706							
TRAVEL ORDERS (Paragraph 5.0. No., Issuing Hq., Date) (Include amending orders)							
Doc ID 1194904FAB001							
PRIOR TRAVEL PAYMENTS OR ADVANCES UNDER THESE ORDERS (Amount, DO Voucher No., Date Received, Place paid, or DO Station No. if none, so state)							
\$150.00 12/30/93 D5							
1. ITINERARY (See item 21 for Symbols)							
DATE	LOCAL TIME (24 Hour Clock)	PLACE (Home, Office, Base, Activity, City and State; City and Country, etc.)	MODE OF TRAVEL	TRAVEL CLASS	2. COST OF LODGING	3. NUMBER OF MEALS GOVT OPEN MESS	4. POC MILES
1-4	DEP 0800	Home	PA			2	100
1-4	ARR 1200	The Destination	TD				
1-5	DEP 1600	Quick City, NC	PA		90.00	3	100
1-5	ARR 2000		MC				
	DEP	Home					
	ARR						
	DEP						
	ARR						
	DEP						
	ARR						
	DEP						
	ARR						
	DEP						
	ARR						
5. REIMBURSABLE EXPENSES/CHARGE FOR DEDUCTIBLE MEALS (See item 24)							
DATE	NATURE AND EXPLANATION				AMT CLAIMED	ALLOWED	
SUMMARY OF PAYMENT							
				Per Diem			
				Actual Expense			
				Mileage or Transp Allowances			
				Reimbursable Expenses			
				Total Entitlement			
				Less Previous Payments			
				Less Voucher Deductions			
				Amt Charged to Acctg Class			
11. PAYMENT DESIRED							
<input checked="" type="checkbox"/> CHECK <input type="checkbox"/> CASH							
12. <input checked="" type="checkbox"/> PER DIEM REQUESTED							
13. BAS RATE							
PENALTY: The penalty for willfully making a false claim is: A MAXIMUM FINE OF \$10,000 OR MAXIMUM IMPRISONMENT OF 5 YEARS, OR BOTH (U.S. Code, Title 18, Section 287.)							
I hereby claim any amount due me. The statements on fact, receipt, and attached are true and complete. Payment or credit has not been received.				14. SIGNATURE OF CLAIMANT		DATE	
				Signature Required		1-7-94	
15. ACCOUNTING CLASSIFICATION							
2/F/401/136/30/0/AB/12345/2100							
Treasury Symbol: 6940201							
16. COLLECTION DATA							
17. COMPUTED BY		18. AUDITED BY		19. TVL RCD POSTED BY		20. RECEIVED (Please signature and date or check no.)	
						Signature Required	
						21. AMOUNT PAID	

DD FORM 1351-2

EDITION OF 1 JUL 65 WILL BE USED UNTIL EXHAUSTED

Exception to SF 1012 and 1012a approved for NARS, GSA April 1978.

Figure 12C-10 DD-1351-2, Travel Voucher or Subvoucher

DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD CG-4251 (TEST)		MILITARY TEMPORARY ADDITIONAL DUTY (TAD) OR CIVILIAN TEMPORARY DUTY (TD) REQUEST AND TRAVEL ORDER			SOCIAL SECURITY NO. 123-12-1234	
When signed by Authorizing Official, this form becomes an Official Travel Order. Request below named person be authorized to perform the following TAD/TD on official business of the Coast Guard.						
1. NAME John Smith		2. GRADE/RATE IPA		3. DIV/BRANCH G-MS		4. EXT. (123) 123-1234
5. DEPARTURE DATE		6. ESTIMATE DAYS ABSENT		7. ESTIMATED COST \$10,000.00		8. REPEAT TRAVEL ORDERS FOR THE PERIOD FROM 93OCT01 TO 94APR14
A. Command, District, Firm or Organization. (List in sequence)				B. LOCATION		C. DATE/TIME (If critical)
OIL POLLUTION ACT STAFF VARIOUS AUTHORIZED LOCATIONS				WASHINGTON, DC		
10. REQUEST				11. MODE OF TRAVEL		
A. <input type="checkbox"/> REGIS. FEE \$ B. <input type="checkbox"/> EXCESS BAGGAGE (LBS) C. <input checked="" type="checkbox"/> LOCAL TRAVEL-TAXI D. <input type="checkbox"/> 1ST CLASS JET E. <input checked="" type="checkbox"/> U-DRIVE/GSA VEHICLE F. <input type="checkbox"/> DAYS LEAVE				NOT APPVD. NOT AUTH. <input type="checkbox"/> COMMERCIAL CARRIER <input type="checkbox"/> GOVT. CONVEYANCE <input checked="" type="checkbox"/> PRIVATELY OWNED CONVEYANCE <input checked="" type="checkbox"/> It has been administratively determined that this method of travel is more advantageous to the Government. IAW JTR, M4204.5.b. <input type="checkbox"/> The total cost to the Government, including per diem, does not exceed the total cost of travel by common carrier, including per diem. (Civilians only.)		
12. PURPOSE OF TRAVEL AND JUSTIFICATION(S) FOR REQUIREMENTS CHECKED IN ITEM 10, AND/OR 11. TRAVEL IS AUTHORIZED IN CONNECTION WITH AN INTERGOVERNMENTAL PERSONNEL ACT ASSIGNMENT (IPA) AUTHORIZATION COVERS TRAVEL FROM WASHINGTON, DC TO MR. COAST'S HOME IN CORDOVA, AK AND OFFICIAL TRAVEL TO VARIOUS LOCATIONS WHILE ON ASSIGNMENT. WHILE IN TRAVEL STATUS, PER DIEM WILL BE APPROVED IN ACCORDANCE WITH RATES LISTED IN THE FEDERAL TRAVEL REGULATIONS, MINUS THE \$27.00 PER DAY WHICH YOU WILL BE PAID FOR MEALS AND \$48.50 FOR LODGING PER THE IPA AGREEMENT.						
I CERTIFY THAT I HAVE FILED TRAVEL CLAIMS AGAINST ALL TRAVEL ADVANCES FOR PREVIOUS TRAVEL ORDERS.						
13. DATE 93AUG25		TRAVEL REQUESTED BY (Signature and Position Title) CAPT I. M. GUARD, DEPUTY DIRECTOR, G-MS				
14. Except as noted, TAD/TD is approved and chargeable as below.				15. Funds available for request as estimated below.		
DIST	APPN. CODE	LIM. CODE	ALLOT FUND	PROGRAM ELEMENT	COST CENTER	OBJECT CLASS
H 4 0 1 1 9	930 0	M F		7 0 5 8 0	2 1 0 0	1 3 9 4 2 3 4 H M F 0 0 4
14a. DATE 93AUG25		SIGNATURE (Approving Official) N. W. REID, DIRECTOR, G-MS				15a. DATE 93AUG25
						SIGNATURE (Accounting Division/Branch) A. T. GRASSA, G-MF
16. Authorized Civilian mileage See DOT Travel Manual, 1500.6, Appendix C.) <input type="checkbox"/> \$.25 <input type="checkbox"/> NONE <input type="checkbox"/> NTE COST BY COMMON CARRIER INCLUDING PER DIEM				17. Authorized CIVILIAN per diem See DOT Travel Manual, 1500.6, Appendix D/Chapter 4, respectively.) <input checked="" type="checkbox"/> \$ 50.00 PLUS LODGING NTE \$ 100.00 <input type="checkbox"/> TRAVEL OF 24 HOURS OR LESS <input type="checkbox"/> NONE <input type="checkbox"/> OTHER (Specify)		
DATE SIGNATURE (Authorizing Official, Items 16 & 17) J. M. SKYLAR						
18. FROM: COMMANDANT (G-MS) TO: John Smith 123-12-1234						
1. Except as noted, the approved TAD/TD is authorized and directed. Proceed and report to the places and in the order listed in Item 9, above. Deviations should not be made to visit places or areas not listed in Item 9, above, without prior written or verbal orders from proper authority. Upon completion of the TAD/TD directed, return to this command and resume your regular duties. (Military per diem is authorized as prescribed in Joint Travel Regulations.)						
DISTRIBUTION:						
19. DATE 93AUG25		SIGNATURE (Authorizing Official) N. W. REID, DIRECTOR, G-MS				

Figure 12C-11 CG-4251, Military Temporary Additional Duty (TAD) or Civilian Temporary Duty (TD) Request and Travel Order

ADVANCE OF FUNDS APPLICATION AND ACCOUNT	1. TYPE OF ADVANCE <input checked="" type="checkbox"/> CASH <input type="checkbox"/> CHECK	2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY <input type="checkbox"/> PERMANENT	3. NAME (Last, first, middle initial) Smith, John		4. ACCOUNT NO. SK1
			5. TELEPHONE NUMBER(S) (804) 396-5731	6. SOCIAL SECURITY ACCOUNT NO. 123-12-1234	
<p>In compliance with Privacy Act of 1974 the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chapter 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, and E.O. 9397 of November 22, 1943. The primary purpose of the information is to facilitate the review, approval, accounting, and advancement of funds for travel and certain relocation allowance expenses to be incurred under appropriate administrative authorization. The requested information will be used by officers and employees of this agency who have a need for such information in the performance of their official duties. The information will be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, security clearances, or other investigations of the performance of official duty while in Government service. Your Social Security Number (SSN) is solicited for use as an employee identification number. Disclosure of the requested information is voluntary; however, failure to provide the information required may result in delay or suspension of your advance of funds request.</p>			7. DEPARTMENT OR ESTABLISHMENT DOT	8. BUREAU, DIVISION OR OFFICE USCGC Neversail	
			9. APPLICATION — (For completion by applicant)		
An advance of funds is hereby requested for travel and other expenses to be incurred by me.			10. BALANCE DUE U.S. FROM PREVIOUS ADVANCE \$ 0		
11. UNDER AUTHORIZATION NUMBER 1194904FAB001			12. DATE OF AUTHORIZATION 28 DEC 93	13. AMOUNT HEREIN APPLIED FOR \$ 150.00	
14. TRAVEL PERIOD From 04 JAN 94 To 05 JAN 94			15. TOTAL \$ 150.00		
16. MAIL CHECK TO <input type="checkbox"/> OFFICE <input type="checkbox"/> RESIDENCE (Give address — number, street, city, State, ZIP code) 1800 Portsmouth Blvd. Portsmouth, VA 23706			<p>Note: Outstanding advances not fully recovered by deductions from reimbursement vouchers must be promptly repaid. When travel is canceled or indefinitely postponed, the full amount of any outstanding advance shall be repaid immediately.</p>		
17. APPLICANT SIGN HERE			18. DATE		
19. SIGNATURE AND TITLE OF APPROVING OFFICIAL James Smith, CWO4, USCG			20. DATE APPROVED 28 DEC 93		21. APPROPRIATION TO BE CHARGED 2/F/401/136/30/0/AB/12345/2100
22. REMARKS			23. CASH PAYMENT RECEIVED		24. DATE

1016-106

STANDARD FORM 1038 (REV. 10-77)
Prescribed by GSA, FPMR (41 CFR) 101-7

Figure 12C-12 SF-1038, Advance of Funds Application and Account